B Z DTDR D OFFICE USE	R HRC	FL WTR	A M	SD GR	FP	RV	ADD
Initial Application DateApplication Completed					Application	on #	
C.C. By D.E. By					P&Z Mod	ule#	
CITY (DEVELOPMENT SERVICES PLEASE PRINT CLE	CENTER 161 3 (828) 23	59-5656 WWW.	ST. ROOM ASHEVILLE	A101 PO BO NC.GOV	X 7148	ASHEVILL	E, NC 28802 T.
PROJECT LOCATION NumberDirection	Street N	Name					
Lot #PIN#			A	Area of Town (c	eircle) <u>N</u>	S Centra	<u>l E W</u>
New Owner YES NO Property Owner		Mailing	g Address				
City		State	Zip_	Phon	e#		
Name of Business/Lessee				Unit#	#		
BUILDING PERMIT (3 coperoject Information(circle): New Addition Remode Demolition Inte	lel Repairs	on Plans including Reroof Building Stru	Moving	<u>Repairs</u>		e of Use	
Occupancy Type (circle) A1,	A2, A3,	•	В, Е,	F1, F2,			
Construction Type (circle) I-A				IV-HT,	V-A,	V-B	
Use of Property	Property Descr	ription (circle) Ow	ner Occupied	Rental	Sale #	of Stories	
Foundation Type (circle) Baseme	nt <u>Crawlspac</u>	se Slab on Gr	ade	Heating !	Source (cir	rcle) <u>Electri</u>	cal <u>Gas</u>
Change of Use YES NO	Previous U	se		If Vacan	t, How Lo	ng	
Sq. ft. Heated Space		-					
Sq. ft. of Carports, Decks, etc		• •		ft. of Renovati			
Description of Work							
GRADING PERMIT ☐ (# of P	lans required, Ref	erence Chart)			y less than pies when 1	0,000 sq ft bi	ut less than 1 acre
Amount of Land to be Disturbed	SQ. FT	Acres	S				er is disturbed
Person Engaged in or	Name						
Conducting the Land Disturbing Activity	Mailing Addre	ess					
	City		State_	Zip			
STORM WATER PERMIT 3 copies of plans to be sul ** Required if impervious surfactors	ce is 50 % or more		opment and/o	r the total devel	lopment is		
The amount of impervious area (b	ouildings, paved a	reas, etc.) after dev	velopment wil	l be SQ. FT		Acres	
The amount of pervious area (lane	dscape, etc.) after	development will	be SQ. FT	Acr	es		
Will the Storm Water Facilities be	e privately mainta	ined? YES	NO				
Section 7-12-2 N – UNIFIED DEVE may be disapproved unless accompanier responsible or his/her attorney. The stater owner of the land or their registered ag statement for purpose of receiving notice	d by an authorized state ment shall include the rents. If the person final e of compliance or nor	ement of financial resp mailing and street addr ancially responsible is a a-compliance with the l	onsibility and ow ess of the princip not a resident of North Carolina Se	nership. This state al place of business North Carolina, a No edimentation Polluti	ment shall be of the person orth Carolina ion Control A	signed by the n financially re agent must be	person financially sponsible and of the designated in the
	HAT HE/SHE IS TH	HE ABOVE APPLIC	CATION FOR	PONSIBLE FOR GRADING PERM	THE LAN	D DISTURB	ING ACTIVITY
NAMECITY	STATE	ZIP	LING ADDR	PHON	NE NUMB	SER	
SIGNATURE_BY (IF ATTORNEY IN FACT)_			T				

ZONING PI	ERMIT [] (7 cc		or Site Plans, Landsonts and Application				dist of
		Requiremen	nts and Application	ioi water ser	vice of water war	vci.)	
DRIVEWA	Y PERMIT [] (1 copy of Surv	ey or Site Plan)				
Width of driv	veway:						
				Tyne	of Drive Apron to b	ne Constructed in R	tight-of-Way
Corner ruum.					(circle) CONC		T-TYPE
			location. Driveway				
			.15, including a conduired to 10' beyond				
point. For m	ultiple driveways	, attach addition	nal copies of this pag	e.			
Permits		Plans	Contractor Busi	ness Name	State License #	Cost of Work	Permit Fees
Requested	Building	Submitted				\$	\$
	Electrical					\$	\$
	Mechanical					\$	\$
	Plumbing					\$	\$
	Fire Sprinkler					\$	\$
	Fire Alarms					\$	\$
	Refrigeration					\$	\$
	Gas Piping					\$	\$
	Hood System					\$	\$
	Other					\$	\$
					Total Project Cost	\$	\$
					ICC Cost	\$	
						Fire Fee	\$
						Plan Review	\$
						Fee Zoning	
						Grading	\$
						Storm Water	\$
						Driveway	\$
						Total Fee	\$
							Ι Ψ
Ow	ner/Agent Signat	ure		Addres		City/S	tate/Zip
0.1				1144105		C103/12	
	Print Name		Phone or Cell	F	ax#	E-Ma	il Address
	Analista at/Dagign			Address		City/0	4040/7:4
	Architect/Designo	er		Address	S	City/S	tate/Zip
	Print Name		Phone or Cell	F		E-Mai	1 Address
					••••	2 111	
Signature of	General Contract	or or Authorized	d Agent	Address		City/S	tate/Zip
	Duint NI		Phone or Cell			E M-	
	Print Name		Phone or Cell	r	'ax#	E-Ma	il Address
			s application is corr ordinances and regi				
wppm			oved plans and spec				
OFFICE US							
Zoning Distr Required Set		- [Right		Left	Building Value \$ Rear	
Flood Plain	Zone		verlay Zone		Lot Size		SQ FT/Acre
WNC AIR Q	UALITY Approv	/ea		Denied:			Date: